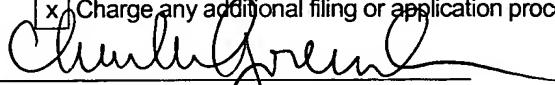




MS AF
REPLY UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP

Docket No.
3891-0103P

AMENDMENT TRANSMITTAL LETTER				Docket No. 3891-0103P																																					
Application No. 10/040,643-Conf. #3010		Filing Date January 9, 2002		Examiner T. T. Nguyen																																					
Art Unit 2144																																									
Applicant(s): Moshe CZEIGER et al.																																									
Invention: MAPPING BETWEEN VIRTUAL LOCAL AREA NETWORKS AND FIBRE CHANNEL ZONES																																									
MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																																									
Transmitted herewith is an amendment in the above-identified application.																																									
The fee has been calculated and is transmitted as shown below.																																									
CLAIMS AS AMENDED																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 15%; text-align: center;">Claims Remaining After Amendment</th> <th style="width: 15%; text-align: center;">Highest Number Previously Paid</th> <th style="width: 15%; text-align: center;">Number Extra Claims Present</th> <th style="width: 15%; text-align: center;">Rate</th> <th style="width: 15%;"></th> </tr> </thead> <tbody> <tr> <td style="text-align: left;">Total Claims</td> <td style="text-align: center;">20</td> <td style="text-align: center;">- 20 =</td> <td></td> <td style="text-align: center;">x</td> <td></td> </tr> <tr> <td style="text-align: left;">Independent Claims</td> <td style="text-align: center;">2</td> <td style="text-align: center;">- 3 =</td> <td></td> <td style="text-align: center;">x</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: center;">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="5" style="text-align: center;">Other fee (please specify): Extension for response within first month</td> <td style="text-align: right;">120.00</td> </tr> <tr> <td colspan="5" style="text-align: center;">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td> <td style="text-align: right;">120.00</td> </tr> </tbody> </table>							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	20	- 20 =		x		Independent Claims	2	- 3 =		x		Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify): Extension for response within first month					120.00	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					120.00
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<p><input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity</p> <p><input type="checkbox"/> No additional fee is required for this amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ 120.00 to cover the filing fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> Credit any overpayment.</p> <p><input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.</p>																																									
 Charles Gorenstein Attorney Reg. No.: 29,271																																									
Dated: December 22, 2005																																									
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